

Vermont Mental Health Performance Indicator Project

DDMHS, Weeks Building, 103 South Main Street, Waterbury, VT 05671-1601 (802-241-2638)

MEMORANDUM

TO: Vermont Mental Health Performance Indicator Project
Advisory Group and Interested Parties

FROM: John Pandiani
Christine Van Vleck

DATE: July 19, 2002

RE: VSH Caseload Overlap with Other AHS Programs

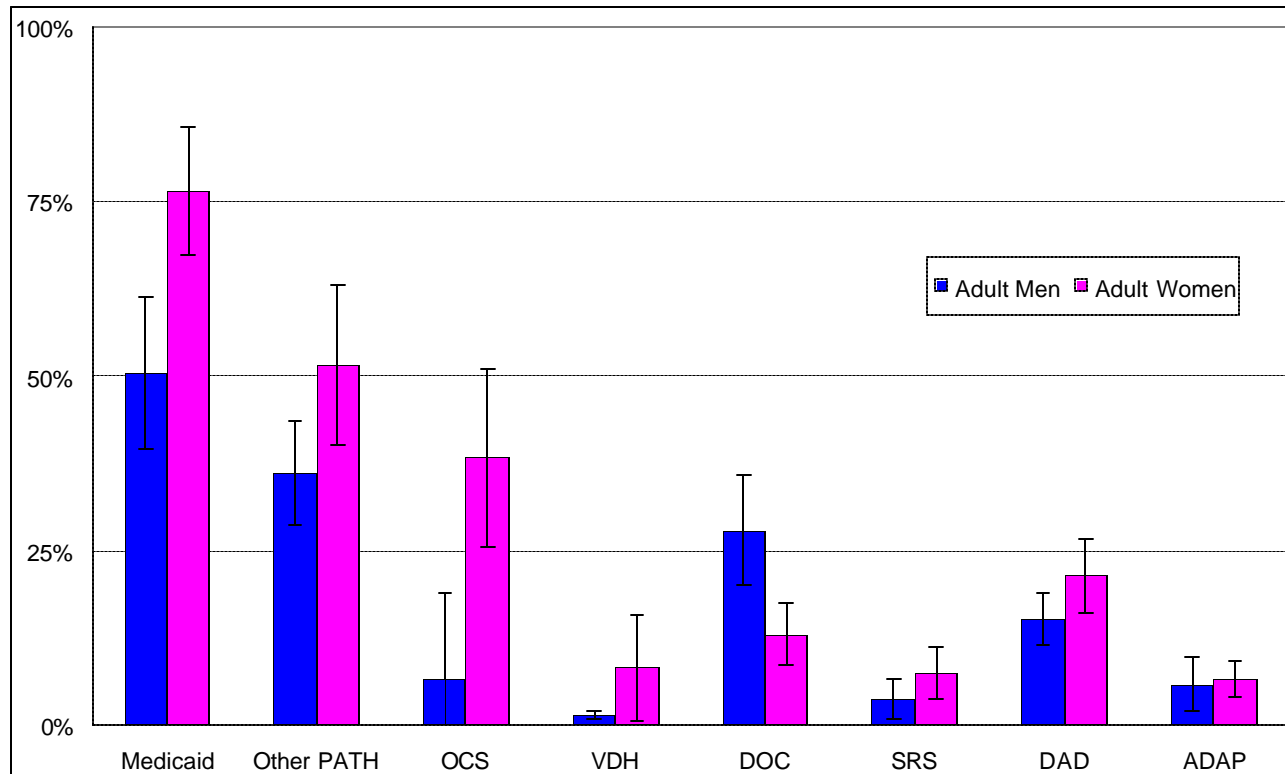
This is the fourth in a series of PIPs that examine levels of caseload overlap between DDMHS programs and other AHS Departments. The attached page provides information on the number of people served by the Vermont State Hospital (VSH) during FY1996-2001 and the proportion of these patients who were also served by eight other AHS Departments during FY2001.

As you will see, 76% of VSH women and 50% of VSH men were on the Medicaid caseload. About 50% of VSH women and 36% of VSH men were on another PATH (The Department of Prevention, Assistance, Transition and Health Access) caseload. These rates were comparable to CRT rates for VSH women, but VSH men were less likely than CRT men to participate in Medicaid or other PATH programs. Thirty-eight percent of VSH women were also on The Office of Child Support (OCS) caseload. This is more than twice the rate for CRT women. Child support participation for VSH men and CRT men were similar (7% vs. 9%), and were much lower than the rate for VSH women. VSH patients were twice as likely as CRT clients to be on the Department of Corrections (DOC) caseload. This was true for both men (28% vs. 13%) and women (13% vs. 6%).

VSH women were eight times as likely as VSH men to be on the Department of Health (VDH) caseload (8% vs. 1%), almost twice as likely to be on the Social Rehabilitation Services (SRS) caseload (7% vs. 4%), and 30% more likely to be on The Department of Aging and Disability (DAD) caseload (21% vs. 15%). VSH men and VSH women were equally likely to be on the Alcohol and Drug Abuse Programs (ADAP) caseload (7% vs. 6%).

We will be interested in your comments about these findings and your suggestions for further analysis. As always you can reach us by e-mail at pip@ddmhs.state.vt.us or by calling 802-241-2638.

Caseload Overlap Between Vermont State Hospital Caseload and Other AHS Caseloads FY2001



Other AHS Departments	Adult Men			Adult Women		
	Total # Served	Served by both VSH and Other Department		Total # Served	Served by both VSH and Other Department	
		Number	% of VSH		Number	% of VSH
Medicaid	34,591 ± 101	388 ± 84	50% ± 10.9%	55,130 ± 160	272 ± 32	76% ± 9.1%
Other PATH	18,334 ± 58	278 ± 57	36% ± 7.4%	28,411 ± 88	184 ± 41	52% ± 11.4%
OCS	18,857 ± 76	52 ± 95	7% ± 12.3%	21,410 ± 89	137 ± 45	38% ± 12.7%
VDH	1,921 ± 9	11 ± 5	1% ± 0.6%	13,553 ± 42	30 ± 27	8% ± 7.5%
DOC	16,626 ± 79	215 ± 61	28% ± 7.9%	3,824 ± 19	46 ± 16	13% ± 4.5%
SRS	1,998 ± 9	29 ± 22	4% ± 2.8%	2,414 ± 11	27 ± 14	7% ± 3.8%
DAD	7,079 ± 21	117 ± 28	15% ± 3.6%	11,917 ± 38	77 ± 19	21% ± 5.3%
ADAP	3,773 ± 18	45 ± 30	6% ± 3.9%	1,556 ± 9	24 ± 10	7% ± 2.7%

VSH served 771 adult men and 357 adult women between FY1996 and FY2001.

Analysis is based on data provided from FY2001 by Medicaid, Other PATH (PATH programs other than Medicaid), Child Support (OCS), Vermont Department of Health (VDH), Department of Corrections (DOC), Social and Rehabilitation Services (SRS), Department of Aging and Disabilities (DAD), and Alcohol and Drug Abuse Programs (ADAP). Person counts include adult Vermont residents.

Because data sets used in this analysis do not share unique person identifiers, Probabilistic Population Estimation was used to measure caseload size and overlap (with 95% confidence intervals).